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***REMARKS***

In the Office Action, the Examiner has acknowledged the claim for priority under 35 USC §119(e), but states that the provisional application upon which priority is claimed fails to provide adequate support for claims 1-28 and 45-51. The Examiner states that the limitation “sigmoidal” found in the claims, is not disclosed in the provisional application, but rather the term “s” curve is used. Similarly, the Examiner states that the limitation “conoid”, in claims 25-28 is not disclosed, but instead the term “cone” is used. The Examiner has also acknowledged the claim for foreign priority based upon the Chinese application, and a certified copy of this application has been requested, and will be submitted upon receipt.

The Examiner has also rejected claims 1-28 and 45-51 under 35 USC §112, first paragraph, as failing to comply with the written description requirements. The Examiner states that the claims contain subject matter that was not described in the specification in accordance with 35 USC §112. In this regard, the Examiner states that claims 1-24 and 45-51 include the limitation “sigmoidal”, while claims 25-28 include the limitation “conoid”, taking the position that these terms are not disclosed in the provisional application to which priority is claimed.

In response to the examiner’s position that the provisional application fails to provide adequate support under 35 USC §112 regarding the terms “sigmoidal” and “conoid”, as well as the rejection under 35 USC §112, first paragraph of the claims, the applicant responds as follows. In a review of the requirements under 35 USC §112, a claim of priority under 35 USC §119 requires that the provisional application comply with the written description requirement under 35 USC §112, first paragraph. In this regard, each claim limitation must be supported in the originally filed disclosure. In reference to MPEP 2163 II(A)(3)(b) it is noted that when an explicit limitation in a claim is not present in the written description of the priority application, the written description requirement of 35 USC §112 is still satisfied if a person of ordinary skill would have understood, at the time the application was filed, that the description supports the limitation. In this regard, the provisional application on which priority is claimed in the present application, clearly does provide proper support and complies with the written description requirement under 35 USC §112.

Both the terms “sigmoidal” and “conoid” are implicitly supported by the written description in the provisional application, which describes the connecting zone for which the term sigmoidal is used in the present description, as an s-curve. In addition to the use of the descriptive term s-curve, the provisional application further described, with particularity, the design of the connecting zone in a manner which clearly supports that a person of ordinary skill would clearly have understood at the time the application was filed, what the design of this connecting zone was, and that it's shape was sigmoidal. In further support of this, the provisional application provides a precise mathematical as well as functional description of the connecting zone which clearly satisfies the written description requirement. Merely as an example, the connecting zone is described as being shaped to substantially match the slopes of the central zone and peripheral zone on adjacent sides, with the slopes of the s-curve at points of intersection 16 and 18 being substantially matched. The connecting zone is also described mathematically in equations 5-8 along with equation 1 clearly provide proper support for the presently claimed invention, as the shape defined by these equations is clearly sigmoidal. The applicant also refers to the drawings provided in the provisional application, which again clearly show a connecting zone which is shaped as a sigmoid, providing support for the present claims, and basis for the priority claim. I would also direct the Examiner's attention to the common definition of sigmoidal, such as found on dictionary.com via the Internet. The term sigmoidal is defined as having the shape of the letters, as seen on the attached print out submitted herewith.

With respect to the term “conoid”, similar support is also provided in the provisional application, satisfying the written description requirements of 35 USC §112, and providing support for the priority claim. Similarly to the term sigmoidal, the term “conoid” was properly supported in the provisional application based the use of the term “cone” therein. The landing zone described in the provisional application, being in the shape of a conoid, is also clearly supported by other description in the provisional application, as well as the drawings. The angle of the cone is described as being selected to be elevated above the peripheral corneal surface relative to a point of tangency. This corresponds to the drawings of the connecting zone, which clearly show the shape of this peripheral zone being a conoid. References again made to the common meaning of the term conoid, such as found on dictionary.com, wherein it is noted that conoid means “shaped like a cone” as attached. A person of ordinary skill would have

immediately recognized the support for the terms as now presented in the present application, and based thereon it is believed that the written description requirement of 35 USC §112, first paragraph, is satisfied, and supports the priority claim as made. It is therefore believed that the claim for domestic priority under 35 USC §119(e) is supported, and the present application should be accorded the benefit of the provisional application filing date.

With respect to the rejection of the claims under 35 USC §112, first paragraph, the rejection should be withdrawn as there is clear support for these claim limitations in the application as originally filed. The question of whether the claims are accorded the benefit of the provisional application filing date does not affect the compliance with 35 USC §112 by the present claims. The terms "sigmoidal" and "conoid" were both in the original description of the present application when filed, and there is therefore clear support for these terms in the present claims. It is therefore believed that this rejection should be withdrawn and favorable action is requested.

The Examiner has also noted that new corrected drawings are required, and formal drawings of Figs. 1-42 are submitted herewith for approval in response thereto.

The Examiner has also rejected claim 3 under 35 USC §103, as being unpatentable over El Hage in view of Harris. Claim 3 has now been canceled, thereby rendering this rejection moot.

Based upon the foregoing, it is believed that the present application should be accorded the benefit of the provisional application filing date, as there was clear and adequate support for the claim limitations “sigmoidal” and “conoid” as presented herein. Further, the claims fully satisfy the requirements of 35 USC §112, as these claim terms are clearly supported in the original description of the present application. It is therefore believed that favorable action is in order, and is respectfully requested.

Respectfully submitted,  
Hahn Loeser + Parks, LLP



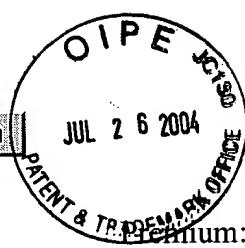
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**sig·moid**  [Pronunciation Key](#) (sīg' moid') also

**sig·moi·dal** (sīg-moid'l)

*adj.*

1. Having the shape of the letter S.
2. Of or relating to the sigmoid colon.

[Greek *sigmoeidēs* : *sigma*, *sigma*; see **sigma** + *-oeidēs*, *-oid*.]

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Source: *The American Heritage® Dictionary of the English*

*Language, Fourth Edition*

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### sigmoidal

Sigmoid \Sig"moid\, Sigmoidal \Sig\*moid"al\, a.  
 [Gr. ???; ??? sigma + ??? form, likeness: cf. F. *sigmo*[*i*]de.]  
 Curved in two directions, like the letter S, or the Greek  
 [sigmat].

Sigmoid flexure (Anat.), the last curve of the colon before it

terminates in the rectum. See Illust. under Digestive.

Sigmoid valves. (Anat.) See Semilunar valves, under Semilunar.

[Try Merriam-Webster Unabridged.]

Source: *Webster's Revised Unabridged Dictionary*, © 1996, 1998 MICRA, Inc.

### **sigmoidal**

adj : of or relating to the sigmoid flexure in the large intestine  
[syn: sigmoid]

Source: *WordNet* ® 1.6, © 1997 Princeton University

### **sigmoidal**

sigmoidal: in CancerWEB's On-line Medical Dictionary

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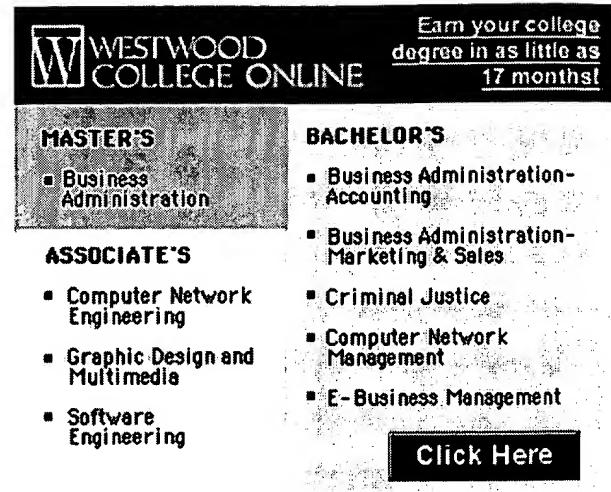


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7 entries found for *conoid*.

**co·noid** **Pronunciation Key** (kō'noīd') also  
**co·noi·dal** (kō-noid'ēl)  
*adj.*

Shaped like a cone.

**co' noid** *n.*

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Source: *The American Heritage® Dictionary of the English Language, Fourth Edition*

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Main Entry: <sup>1</sup>**co·noid**

Pronunciation: 'kō- "noid

Variant: *or co·noi·dal* /kō- 'noid-ēl/

Function: *adjective*

: shaped like or nearly like a cone

Source: *Merriam-Webster Medical Dictionary, © 2002*

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Main Entry: <sup>2</sup>**conoid**

Function: *noun*

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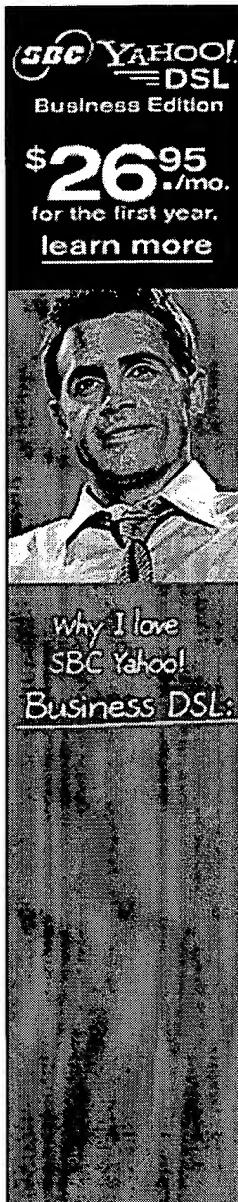
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: a cone-shaped structure; *especially* : a hollow organelle shaped like a truncated cone that occurs at the anterior end of the organism in some developmental stages of some sporozoans (as of the genus *Sarcocystis*)

Source: *Merriam-Webster Medical Dictionary*, © 2002  
*Merriam-Webster, Inc.*



### conoid

\Co"noid\, n. [Gr. ? conical; ? cone + ? from: cf. F. cono["i] de.] 1. Anything that has a form resembling that of a cone.

2. (Geom.) (a) A solid formed by the revolution of a conic section about its axis; as, a parabolic conoid, elliptic conoid, etc.; -- more commonly called paraboloid, ellipsoid, etc. (b) A surface which may be generated by a straight line moving in such a manner as always to meet a given straight line and a given curve, and continue parallel to a given plane. --Math. Dict.

[Try Merriam-Webster Unabridged.]

Source: *Webster's Revised Unabridged Dictionary*, © 1996, 1998 MICRA, Inc.

### conoid

\Co"noid\ a. Resembling a cone; conoidal.

[Try Merriam-Webster Unabridged.]

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### conoid

n : a shape whose base is a cone and whose sides taper up to a point [syn: cone, cone shape]

Source: *WordNet* ® 1.6, © 1997 Princeton University

### conoid

conoid: in CancerWEB's On-line Medical Dictionary

Source: *On-line Medical Dictionary, © 1997-98 Academic Medical Publishing & CancerWEB*

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